

Application Data Sheet

Application Information

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | None |
| Computer Readable Form (CRF):: | No |
| Number of copies of CRF:: | 0 |
| Title:: | COMBINATION OF FLAVONOID AND PROCYANIDIN FOR THE REDUCTION OF THE MAMMALIAN APPETITE |
| Attorney Docket Number:: | 2001-1185-1 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 0 |
| Small Entity?:: | No |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Gov't Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: NETHERLANDS
Status:: Full Capacity
Given Name:: ARIE GIJSBERT
Middle Name::
Family Name:: NIEUWENHUIZEN
Name Suffix::
City of Residence:: UTRECHT
State or Province of
Residence::
Country of Residence:: NETHERLANDS
Street of Mailing BOLSTRAAT 81
Address::
City of Mailing Address:: UTRECHT
State or Province of Mailing Address::
Country of Mailing Address:: NETHERLANDS
Postal or Zip Code of Mailing Address:: NL-3581 WV

Applicant Authority Type:: Inventor
Primary Citizenship Country:: BELGIUM
Status:: Full Capacity
Given Name:: KATRIEN MARIA JOZEFA
Middle Name::
Family Name:: VAN LAERE
Name Suffix::
City of Residence:: HETEREN
State or Province of
Residence::
Country of Residence:: NETHERLANDS
Street of Mailing KAMPERFOELIESTRAAT 11
Address::
City of Mailing Address:: HETEREN

State or Province of Mailing Address::
Country of Mailing Address:: NETHERLANDS
Postal or Zip Code of Mailing Address:: NL-6666 WS

Applicant Authority Type:: Inventor
Primary Citizenship Country:: NETHERLANDS
Status:: Full Capacity
Given Name:: RENE JOHN
Middle Name::
Family Name:: RAGGERS
Name Suffix::
City of Residence:: AMSTERDAM
State or Province of
Residence::
Country of Residence:: NETHERLANDS
Street of Mailing STAALMEESTERSLAAN 243
Address::
City of Mailing Address:: AMSTERDAM
State or Province of Mailing Address::
Country of Mailing Address:: NETHERLANDS
Postal or Zip Code of Mailing Address:: NL-1057 NX

Correspondence Information

Correspondence Customer 00466
Number::

Representative Information

| | |
|-------------------------|-------|
| Representative Customer | 00466 |
| Number:: | |

Domestic Priority Information

| | | | |
|------------------|----------------------|-------------------------|-------------------------|
| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This application | National Stage of | PCT/NL03/00198 | 3/18/03 |
| | | | |

Foreign Priority Information

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|-----------------------------|-------------------------|---------------|-----------------------|
| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
| UNITED STATES OF AMERICA | 10/295,987 | 11/18/02 | Yes |
| | | | |

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::